ABNORMAL UTERINE BLEEDING (PBL) (SUPPLEMENTS LECTURE)

Learning Objectives
1. Discuss the causes of abnormal uterine bleeding.
2. Contrast the differences in etiology and evaluation of abnormal bleeding for women in different age categories.
3. Describe the pathophysiology and treatment of dysfunctional uterine bleeding.
4. Discuss the symptoms, physical findings, evaluation and management options of uterine leiomyomas.
5. Discuss the approach to the patient with post-menopausal bleeding.

Case 1: A 36-year-old female nulligravida presents to your office for her routine examination. She has regular menses, lasting 8 - 10 days with a heavy flow the first 4 - 5 days. She also complains of tiredness.

Physical examination is remarkable for:
- Abdomen - soft, nontender, no masses are palpable
- Pelvic - normal external genitalia, nulliparous cervix
  bimanual reveals a 12-week size uterus, consistency compatible with fibroids; no abnormal adnexal masses are appreciated.

Hemoglobin is 9.2.

Study Questions:
1. How would you evaluate this patient?
2. Discuss indications for treatment and management options; contrast surgical and medical treatment.

Case 2: An 18 year old female presents to your office complaining of heavy menstrual bleeding and dizziness. She is passing “clots” and has been bleeding for 8 days. Her last menstrual period was 3 months ago.

Physical examination is remarkable for:
- abdomen - soft, nontender, no masses are palpable
- pelvic - normal external genitalia, nulliparous cervix
  bimanual reveals a normal size, anteverted uterus and adnexae

Hemoglobin is 9.

Study questions:
Discuss pathophysiology and management of DUB - dysfunctional uterine bleeding.
Case 3: A 62-year-old female patient with diabetes, G3P3, presents for her routine yearly exam. Menopause occurred seven years ago but she complains of recent vaginal spotting.

Physical examination is remarkable for:
   Ht 5'2'' Wt 160 lbs  BP 155/85
   Breast - no masses appreciated, no dimpling or discharge
   Abdomen - soft, nontender, no masses palpable
   Pelvic - normal cervix, small anteflexed uterus, adnexa non-palpable

Study questions:
1. What are the causes of post-menopausal bleeding?
2. What are the risk factors for endometrial hyperplasia and cancer?
3. Describe your approach to evaluating the source of this bleeding.